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Robert C. Kowert MEYERTONS, HOOD, P.O. BOX 398		GOETZEL, P.C		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmital is being deposited with the United States Postal Service with sufficient postage for first class small in an envelope addressed to the Mail Stop ISSUE EEE address above, or being fastsmile transmitted to the USPTO (271) 273-2885, on the date indicated below.			
AUSTIN, TX 78767-039	98					(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/660,005 TITLE OF INVENTION:	09/12/2000	Thomas E. Saulpa		ugh	5181-66200	6061	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	JE FEE TOTAL FEE(S) DU	E DATE DUE	
nonprovisional	NO	\$1510	\$0	\$0	\$1510	02/10/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
"Fee Address" indi PTO/SB/47; Rev 03-0 Number is required. 3. ASSIGNEE NAME AI	ondence address (or Chi u/122) attached. action (or "Fee Address at or more meent) attach ND RESIDENCE DAT: sess an assignce is ident in 37 CFR 3.11. Com INEE o.	nge of Correspondence " Indication form ced. Use of a Customer A TO BE PRINTED ON iffed below, no assignce pletion of this form is NO	or agents OR, alter (2) the name of a s registered attorney 2 registered patent listed, no name wi THE PATENT (print c data will appear on t T a substitute for filin (B) RESIDENCE: (C Santa Clara, CA	ingle firm (having as or agent) and the nan attorneys or agents. If i be printed. r type) ne patent. If an assignant assignment. ETY and STATE OR	a member a 2_Mayartor nes of up to 2 3_Mayartor 3_Movement is 3_Movement is identified below, the COUNTRY)	Kowert s. Hood, Kiviln, eert & Goetzel, P.C. document has been filed for proup entity Government	
4a. The following fee(s) are submitted: Issue Fee			A check is enclos	syment of Feq(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 501505 (enclose an extra copy of this form).			
	rus (from status indicate s SMALL ENTITY stat		☐ b. Applicant is no	longer claiming SMA	LL ENTITY status. Sec 37	CFR 1.27(g)(2).	
						the assignee or other party in	
Authorized Signature /Robert C. Kowert/					2 29 08		
Typed or printed name Robert C. Kowert					No. <u>39,255</u>		
This collection of inform an application. Confident submitting the completed this form and/or suggests Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 diality is governed by 3: I application form to the ons for reducing this builting in 22313-1450. Diality 13-1450.	CFR 1.311. The informati 5 U.S.C. 122 and 37 CFR e USPTO. Time will var trden, should be sent to the O NOT SEND FEES OR	on is required to obtain 1.14. This collection y depending upon the ne Chief Information C COMPLETED FORM	or retain a benefit by s estimated to take 12 individual case. Any officer, U.S. Patent and S TO THIS ADDRES	the public which is to file (a minutes to complete, inclus comments on the amount of I Trademark Office, U.S. Do SS. SEND TO: Commissions	and by the USPTO to process) ling gathering, preparing, and time you require to complete spartment of Commerce, P.O. or for Patents, P.O. Box 1450,	

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